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A Professional Corporation

Fax Transmission | September 22, 2004

TO: Commissioner for Patents
Attn: Examiner Beemnet W. Dada
P.O. Box 1450
Alexandria, VA 22313-1450

FROM: Mark R. Hennings
OUR REF: 50014.0001US01
TELEPHONE: 206.342.6200

Total pages, including cover letter: 20

PTO FAX NUMBER 1-703-872-9306

If you do NOT receive all of the pages, please telephone us at 206.342.6200, or fax us at 206.342.6201.

Title of Document Transmitted:	<u>Transmittal (+ 1 copy) and Final Response</u>
Applicant:	<u>Joseph P. R. Tosey</u>
Serial No.:	<u>09/551,919</u>
Filed:	<u>April 19, 2000</u>
Group Art Unit:	<u>2135</u>
Our Ref. No.:	<u>50014.0001US01</u>
Confirmation No.	<u>3485</u>

Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. Please consider this a PETITION FOR EXTENSION OF TIME for a sufficient number of months to enter these papers, if appropriate.

I hereby certify that this paper is being transmitted by facsimile to the U.S. Patent and Trademark Office on the date shown below.

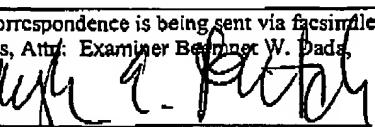
By 
Name: Mark R. Hennings
Reg. No.: 48,982

September 22, 2004

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Joseph P. R. Tosey Examiner: Beemnet W. Dada
 Serial No.: 09/551,919 Group Art Unit: 2135
 Filed: April 19, 2000 Docket: 50014.0001US01
 Confirmation No.: 3485 Due Date: September 23, 2004
 Title: OPERATING SESSION REAUTHORIZATION IN A USER-OPERATED DEVICE

CERTIFICATE UNDER 37 CFR 1.6(d): I hereby certify that this correspondence is being sent via facsimile to (703) 308-7724, Mail Stop Amendment, Commissioner for Patents, Attn: Examiner Beemnet W. Dada, P.O. Box 1450, Alexandria, VA 22313-1450 on September 22, 2004.

By: 
 Name: Kayla D. Butcher

Mail Stop Amendment
 Attn: Examiner Beemnet W. Dada
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

23552
 PATENT TRADEMARK OFFICE

Sir:

We are transmitting herewith the attached:

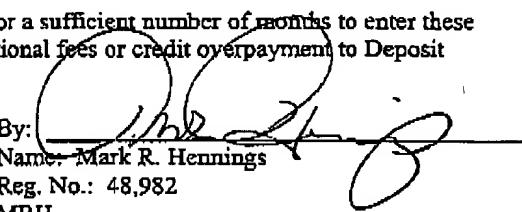
- Transmittal Sheet in duplicate containing Certificate Under 37 CFR 1.6(d)
- Final Response
 The fee has been calculated as shown below in the "Claims as Amended" table
- Please charge Deposit Account No. 13-2725 in the amount of \$122.22 for Additional fees

CLAIMS AS AMENDED

Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	Rate	Fee
Total Claims				
36	- 34	= 2	x 18.00	= \$36.00
Independent Claims				
4	- 3	= 1	x 86.00	= \$86.00
MULTIPLE DEPENDENT CLAIM FEE				\$0.00
TOTAL FILING FEE				122.00

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By: 
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(PTO TRANSMITTAL - GENERAL)